


PATIENT PRESENTING CLINICAL SIGNS

Dallas Gerlach History: Elevated liver values since Aug 2020, normal bile acids. Checked enzymes in May and further elevated despite denamarin. Ultrasound found discrete liver mass - need CT for surgical planning. Thorax to ensure no neoplasia.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Increased platelets 503 K/uL, ALT 230 U/L, ALKP 840 U/L

COMPUTED TOMOGRAPHIC STUDY OF THE THORAX AND ABDOMEN
BREED

Puggle

A high resolution pre- and post-contrast CT study of the skull and abdomen and a post-contrast CT study of the thorax are provided for review.

COMPUTED TOMOGRAPHIC FINDINGS
SEX

Spayed Female

Thorax

A mild amount of mineral attenuating material is seen in multiple intervertebral disc spaces of the thoracic spine.

AGE

12 Years

The sternal, cranial mediastinal and tracheobronchial lymph nodes are small elongated with a normal short-to-long-axis-ratio is < 0.5, the attenuation and contrast enhancement pattern is uniform and considered within normal limits.

Mild mineralization of the wall of the aortic root is visible.

INTERPRETED BY

Sebastian Schaub,
 DVM Dr. med. vet.
 DipECVDI

The bronchial tree presents with regular branching and tapers uniformly towards the periphery as expected, the bronchial walls are thin and smooth. The bronchus-to-artery ratio is within normal limits. The lung parenchyma presents the expected architecture and attenuation behavior, but regions of compression atelectasis of the left lung lobes.

The esophagus is moderately distended by gas.

HOSPITAL NAME

Bridgwater VH & WC

Abdomen

The serosal fat presents normal attenuation behavior. There is no evidence of peritoneal effusion or peritonitis.

REFERRING VET

Dr. Robertson/Sra

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration a bilaterally symmetric and uniform nephro- and pyelogram is noted.

The adrenal glands are within normal limits for size, shape and organ architecture.

INVOICE

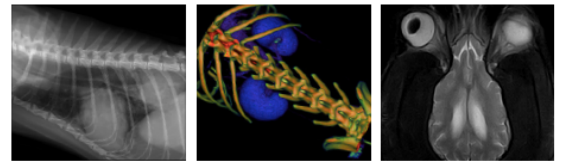
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The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

DATE

9/28/21

Originating from the caudoventral margin of the right lateral liver lobe, a mild irregular ovoid shaped, mild irregular soft tissue attenuating and heterogeneous contrast enhancing mass is visible protruding caudally into the ventral abdominal cavity. The hepatic mass is measuring 7.9 x 4.8 x 7.7 cm in size. The remainder of the hepatic parenchyma are uniform soft tissue attenuating and contrast enhancing.



PATIENT The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

Dallas Gerlach

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

SPECIES

Canine

Level with the intervertebral disc space L3/L4 in the right ventral aspect of the vertebral canal, a mild amount of heterogeneous mineralized disc material is seen in the vertebral canal, occupying approximately 10% of the cross-sectional area of the vertebral canal at the same level.

BREED

Puggle

COMPUTED TOMOGRAPHIC DIAGNOSIS

- Solitary pedunculated hepatic mass caudoventral aspect right lateral liver lobe
- Chronic intervertebral disc protrusion L3/L4 with possible dynamic spinal cord compression
- Mild dystrophic mineralization aortic root
- Dystelectasis left lung lobes – due to general anesthesia
- Megaesophagus – suspect secondary to general anesthesia
- Multifocal chondroid disc degeneration
- No evidence of pulmonary metastatic disease

SEX

Spayed Female

AGE

12 Years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The hepatic mass is compatible with primary hepatic neoplasia and differentials include hepatocellular adenoma/carcinoma, hemangiosarcoma, cholangiocellular carcinoma, other. Complete surgical excision of the mass is feasible.

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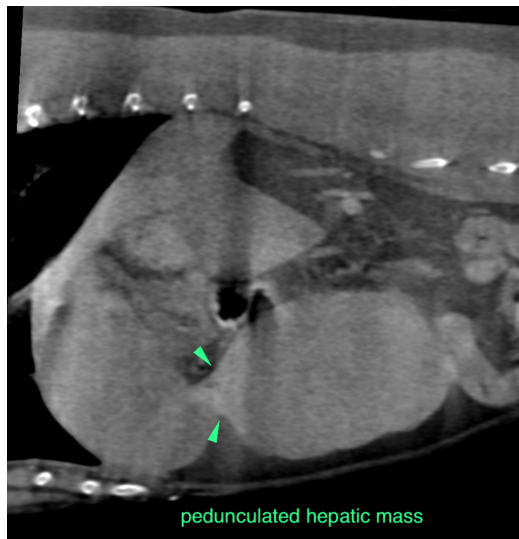
Bridgwater VH & WC

REFERRING VET

Dr. Robertson/Sra

INVOICE

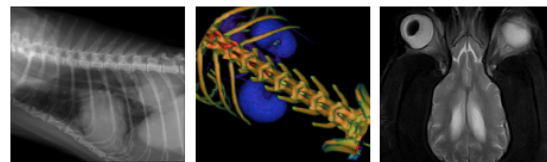
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

Dallas Gerlach

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